

09/314,243

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>AS</i>		<i>5/27/99</i>
O.I.P.E. CLASSIFIER		<i>12</i>	<i>12</i>
FORMALITY REVIEW	<i>TMB</i> <i>TMB</i>	<i>70976</i> <i>70976</i>	<i>8-8-99</i> <i>8-4-99</i>

INDEX OF CLAIMS

✓ Rejected
 - Allowed
 (Through numeral) Canceled
 - Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	✓	✓	10/15/94
2	✓	✓	10/15/94
3	✓	✓	10/15/94
4	✓	✓	10/15/94
5	✓	✓	10/15/94
6	✓	✓	10/15/94
7	✓	✓	10/15/94
8	✓	✓	10/15/94
9	✓	✓	10/15/94
10	✓	✓	10/15/94
11	✓	✓	10/15/94
12	✓	✓	10/15/94
13	✓	✓	10/15/94
14	✓	✓	10/15/94
15	✓	✓	10/15/94
16	✓	✓	10/15/94
17	✓	✓	10/15/94
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25	✓	✓	10/15/94
26	✓	✓	10/15/94
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28	✓	✓	10/15/94
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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